## **CENTER FOR DRUG EVALUATION AND RESEARCH**

**APPLICATION NUMBER: NDA 5970/S22** 

## **ADMINISTRATIVE DOCUMENTS**

Elkins-Sinn, Inc. Cherry Hill, N.J. 08002

## MEMORANDUM OF TELEPHONE CONVERSATION

Between:

Thelma C. Hilibrand, Manager

Regulatory Affairs

and: Clarence M. Nealey, jr., SCSO

HFD-160

Additional Revisions package insert (Our Letter September 3, 1976)

Dr. Walters brought to my attention the subject letter called for additional revisions under adverse reactions due to a death report which he reviewed 8/23/76. That the approvable letter on September 9, 1976 signed out by Dr. Finkel on S-022 has labeling that should include the adverse reaction change.

Ms. Hilibrand was returning my call of the 13th and when I explained fully what has happended, she stated she would amend S-022 with revised draft to amend the labeling to include the revision in our September 3, 1976 letter. The conversation ended with the usual amenities.

Clarence M. Nealey, jr, SCSO

cc: NDA 5-970 HFD-160(2) HFD-108 DocumentRoom/HFD-160 R/D C.M.Nealey/HFD-160 R/D Init. M.Clark, M.D. 9/17/76 R/D Init. P.G.Walters 9/17/76 ft pd 9/22/76

## NEW DRUG APPLICATION OR SUPPLEMENT FROM: 10: Bureau of Drugs Press Relations Staff (PA-40) Bureau of Veterinary Medicine ATTENTION Forward original of this form for publication only after approval letter has been issued and the date of approval has been entered above. CATEGORY TYPE OF APPLICATION TO ANDA ORIGINAL NDA ORIGINAL NDA XX TO NDA VETERINARY MAMUH (X) TRADE NAME (or other designated name) AND ESTABLISHED OR NONPROPRIETARY NAME (if any) OF DRUG Sotradecol (Sodium tetradecyl sulfate) HOW DISPENSED DOSAGE FORM OTC XX RX Injection ACTIVE INGREDIENT(S) (as declared on label. List by established or nonproprietary name(s) and include amount(s), if amount is declared on label.) NAME OF APPLICANT (Include City and State) Elkins-Sinn, Inc. Cherry Hill, NJ 08002 PRINCIPAL INDICATION OR PHARMACOLOGICAL CATEGORY A sclerosing agent COMPLETE FOR VETERINARY ONLY ANIMAL SPECIES FOR WHICH APPROVED COMPLETE FOR SUPPLEMENT ONLY CHANGE APPROVED TO PROVIDE FOR Labeling revision FORM PREPARED BY DATE 4/12/77 F. Kuerer FORM APPROVED BY DATE HAME P. G. Walters M.D.

DATE APPROVAL LETTER ISSUED

NOTICE OF APPROVAL